POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*BA*	70385	
O.I.P.E. CLASSIFIER		49	11/9/00
FORMALITY REVIEW	*WL*	62477	12-11-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date								Claim		Date								Claim		Date							
Final	Original									Final	Original									Final	Original								
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	2										52										102								
	3										53										103								
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	48										98										148								
	49										99										149								
	50										100										150								

If more than 150 claims or 10 actions
staple additional sheet here

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